SUBMIT: <u>COMPLETED</u> APPLICATION, TAX

至60

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN Date Stamp (Received)

FN 132014

Date: Permit #: Amount Paid: 1-11-1 OSIA 1-11-1-10 14-0008

Sayled Co. Zoning Dept.

Refund:

| Secrotal I (we) declare that the am (are) responsible may be a result of B above described brook | | | | Rec'd for Issuance | - | 🛮 🗀 Municipal Use | | | Commercial Use | | | | X Residential Use | | | Proposed Use | Proposed Construction: | Existing Structure | | | | - | 600 - 5 | . | i alei al | Value at Time of Completion * include donated time & | □ Non-Shoreland | | X Shoreland → | | Section / | 2631 | ` *) | PROJECT ' LOCATION | 15302 | Authorized Agent: (Pe | Contractor: | 0 1975 BAS | JAV 10 | Owner's Name: Khonda | YPE OF PERMIT RE |
|---|---------------------------------------|----------------------------|------------------------|--------------------|----------------------|--|---|--|--|---|-------------|--|---|---|---|--------------------|------------------------|---|--|--|---------------------|----------------------------|--------------------------------------|----------------------|--------------------|--|-----------------|------------------|-------------------------|--|---------------|--|--------------------------|-------------------------|-----------------------|--|-----------------------|-------------|-----------------|----------------------|-------------------|
| FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection. | □ Other: | O4 /UIN Condit | | ,Ď | 4 | | Mobile Nobile | | | 1,000 | | | Jsp | ☐ Reside | | | iction: | Existing Structure: (If permit being applied for is relevant to | The state of the s | Property | ☐ Run a Business on | ☐ Relocate (existing bldg) | ☐ Conversion | XAddition/Alteration | ☐ New Construction | Project (What are you applying for) | | | % Is Property/Land with | ⅓ is Property/Land within 300 feet of R Creek or Landward side of Floodplain? | Township | \ | N 1/4 Gov | Legal Description: (Use | 7.75 | Authorized Agent: (Person Signing Application on behalf of Owner(s)) | | DAYSUND R | JIMBUS QU | Mala | <u>.</u> |
| ETO OBTAIN A PERMIT or ST. ipanying information) has been ex information i (we) am (are) providing rmation i (we) am (are) providing e purpose of inspection. | Other: (explain) | Conditional Use: (explain) | Special Use: (explain) | | ≥ l | | Mobile Home (manufactured date) Addition (Alteration (specify) | Bunkhouse w/ (☐ sanitary, or ☐ sleeping quarters, or ☐ cooking & food prep facilities) | with Attached Garage | with (2 nd) Deck | with a Deck | with (2 nd) Porch | with a Porch | Residence (i.e. cabin, hunting shack, etc.) | Principal Structure (first structure on property) | | | for is relevant to it) | | - Foundation | - 1 | | □ 2-Story | | ☐ 1-Story | # of Stories and/or basement | | Мy | ake, | 为 is Property/Land within 300 feet of River, Stream Creek or Landward side of Floodplain? If yes | N, Range CO W | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | Gov't Lat Lat(s) CSM | Tax Statement) | PIN: (| | Contra | Y | City/s | | KAND USE SANITARY |
| ARTING CONSTRUCTION amined by me (us) and to the ng and that it will be relied u in or with this application. | | | | | Alteration (specify) | ļ | JAN EV CO | ☐ sleeping quarters, | arage | | | - Address - Addr | *************************************** | shack, etc.) | cture on property) | Proposed Structure | ren g ui. | Length: | | | - Human | | | ☐ Year Round | メ Seasonal | Use | | ff yescontinue → | | am (incl. Intermittent) | | n of: | | 04- | 1/11 | | Contractor Phone: Plu | BANIZ | City/State/Zip: | g Address: | □ PRIVY |
| WITHOUT A PERMIT W best of my (our) knowled pon by Bayfield County in (we) consent to county of | 2444 | | | | | ı ır | Noch | or □ cooking & foo | AWAY TO THE REAL PROPERTY OF THE PROPERTY OF T | waite a cultural and | | | 11111 | | 4411 | C | # 4 | ¥ \$ | teri | | None | | 3 | 2 |] 1 | edrooms | | 100 1 | Distance Structure | Distance Structure ノスのナ | WELLE | | Lot(s) No. | | 11 13603110001 | Agent Mailing Address | Plumber: | M 54804 | 3 | City/st | ☐ CONDITIONAL USE |
| ILL RESULT IN PENALTIE ge and belief it is true, corr determining whether to is fficials charged with admir | | | | - Landard Company | | LIM STORY OF THE S | | | | - V-V-V-V-V-V-V-V-V-V-V-V-V-V-V-V-V-V-V | - | philippin and the state of the | | | | | | Width: | | □ None | Compost Toilet | Privy (Pit) or | Sanitary (Exists) | (New) Sanitary S | Municipal/City | What Sewer/Sar Is on the | | feet | is from Shoreline : | is from Shoreline : feet | | Lot Size | Block(s) No. Subdivision | | 3 | ude City/S | | 2 | LIKAN KIVEK | *** | ☐ SPECIAL USE |
| ES ect and complete. I (we) a sue a permit. I (we) furthe istering county ordinances | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | Y | | | × | (x | 5 | × | | × | × | × | ×) | × | × | Dimensions | | Height: | | , compared to the control of the con | e connact) | Vaulted (min 200 gallon) | Sanitary (Exists) Specify Type: Conc | Specify Type: | | What Type of Sewer/Sanitary System Is on the property? | | # No | □Yes | Is Property in Floodplain Zone? | | | | 795 | led Document: (i.e. P | | | 25 | Cell Phone: | Teleph | . B.O.A |
| acknowledge that I (we) ar accept liability which s to have access to the | | | | | | | 776 | | | | | | | | | Footage | | | | | | gallon) | | | □ City | Water | | No | | | **** | Acreage 77 | | Page(s) 6/2 | roperty Ownership) | | Plumber Phone: | 75-413-0842 | hone: | Telephone: | OTHER |

Address to send permit_

Hegstrom

H-Word,

CI

5486 Copy of Tax Statement / Copy of Tax Statement / If you recently purchased the property send your Recorded Deed

Date

1-8-13

must accompany this application)

Authorized Agent:

(If you are signing 62144

Please complete (1) - (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

| Description Measurement Description Descr | | | | Feet | Ž | Setback to Privy (Portable, Composting) |
|--|------|----------|---------------------------------------|---|------------|--|
| Measurement Description Measurement 100 | | | | Feet | | Setback to Drain Field |
| Measurement Description Measurement 100 h Feet Setback from the Lake (ordinary high-water mark) 100 h 100 h Feet Setback from the River, Stream, Creek 130 h 100 h Feet Setback from the Bank or Bluff 100 h 100 h Feet Setback from Wetland 100 h 100 h Feet Setback from 20% Slope Area 100 h 100 h Feet Setback from 20% Slope Area 100 h 100 h Feet Setback from 20% Slope Area 100 h | Feet | 100+ | Setback to Well | Feet | Ą | Setback to Septic Tank or Holding Tank |
| Measurement Description Measurement 100 | | | | | > | |
| Measurement Description Measurement 100 | Feet | 70 5 | Elevation of Floodplain | Feet | ' | Setback from the East Lot Line |
| Measurement Description Measurement 100 | reet | 10/13 | Setback from 20% Slope Area | Feet | | Setback from the West Lot Line |
| Measurement Description Measurement Description Measurement Measurement Description Measurement Measurement Description Descr | Feet | 1007 | Setback from Wetland | Feet | NA | Setback from the South Lot Line Town VA |
| Measurement Description Measurement 100 | 1 | | | Feet | 4 | 1 |
| Measurement Description Measurement 100 | Feet | 70 13 | Setback from the Bank or Bluff | | | |
| Measurement Description Measurement // Do b Feet Setback from the Lake (ordinary high-water mark) // DO d // DO d | Feet | 120 A | Setback from the River, Stream, Creek | Feet | | Setback from the Established Right-of-Way |
| Measurement Description | Feet | +00/ | vater r | Feet | | Setback from the Centerline of Platted Road |
| Measurement Description | | | | V-100 | | |
| | ent | Measurem | Description | | Measuremen | Description |

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed content or marked by a licensed surveyor at the owner's expense. Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

| Condition(s): Town, Committee or Board Conditions Attached? TYES No-(If No they need to be attached.) Signature of Impector: Date of Appointment of Impec |
|--|
|--|

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN Date Stamp (Received)

Ty and a Permit #:

Amount Paid: r., 7 B A 11-20-14 7

Refund:

W 17214

Sangager and

| FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENAITIES [(we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct [(we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct am (are) responsible for the detail and accuracy of all information (we) am (are) providing and that it, will be relied upon by Bayfield County in determining whether to issue am (are) responsible for the detail and accuracy of all information (we) am (are) providing in or with this application. I (we) consept to county officials charged with administe may be a result of Bayfield County relying on this information (we) am (are) providing in or with this application. I (we) consept to county officials charged with administence. | Secretarial Staff | | י אוווע אין מווע ל | Rec'd for Issuance | Municipal Use | | | Commercial Use | | | | Residential Use | | The state of the s | Proposed Use | | Existing Structure: (if p | | Pr | | \$ 1.0%().1 \$ | X Ad | material No | Value at Time of Completion * include donated time & | □ Non-Shoreland | X Shoreland → XIs | 1 | | 212200 P 9521 | VE 1/4, N | PROJECT Lega | | Authorized Agent: (Person Signing | de materials. | Flyma Erale | Owner's Name: David Rhonda T | TYPE OF PERMIT REQUESTED | DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED I U APPLICANT. |
|---|-------------------|--|------------------------|--|------------------------------|----------------------------------|---------------------------------|-----------------------|-----------------|--|--|-----------------|---|--|--------------------|---------|---|--------|---|--------------------------|-------------------|---------------------|------------------|---|-----------------|--|---|-----------------|---------------|------------------|-------------------------|------------------|---|---------------------------------------|--------------|--|--------------------------|---|
| FAILUR for including any accommendation (including any accommendation of all including on this information relying on this information). | ☐ ☐ Other: | ☐ Condit | Specia | ☐ Access | ☐ Access | $\stackrel{\frown}{\rightarrow}$ | | Binkh | | | 3 | | Reside | ☐ Princip | • | | ermit being applied | | Property | Relocate (existing bldg) | Conversion | Addition/Alteration | Construction | Project (What are you applying for) | | Property/Land with | Property/Land with | , Township *** | | _ 1/4 | Legal Description: (Use | | (Person Signing Application on bet | | Resort | | TED→ KLAND USE | UNTIL ALL PEKINIIS HI |
| ETO OBTAIN A PERMIT or panying information) has been formation I (we) am (are) providi mation I (we) am (are) providi | Other: (explain) | Conditional Use: (explain) | Special Use: (explain) | Accessory Building Addition/Alteration (specify) | Accessory Building (specify) | Addition/Alteration (specify) | Wobile Home (manufactured date) | with Attached Garage | with (2"") Deck | with a Deck | with (2 nd) Porch | with a Porch | Residence (i.e. cabin, hunting shack, etc.) | Principal Structure (first structure on property) | | | (if permit being applied for is relevant to it) | | ☐ Foundation | 1 1 | 2-Story | 1 -Story + Loft | 1983 | # of Stories and/or basement | | Kls Property/Land within 1000 feet of Lake, Pond or Flowage If yescontinue | Creek or Landward side of Floodplain? If yes- | N, Range W | | Gov't Lot Lot(s) | (Use Tax Statement) 04- | | nalf of Owner(s)) Ago | 500 | Cir | | VD USE 🗆 SANITARY | |
| STARTING CONSTRUCTIO examined by me (us) and to t iding and that it, will be relied ing in or with this application | | and the second s | | n/Alteration (specif | īfy) | IN CONEVECT | d date) | Garage | | - Addition of the Control of the Con | 1 | 1777 | ng shack, etc.) | ructure on property | Proposed Structure | Length: | Length: | | A THE PROPERTY OF THE PARTY OF | | | | ▼ Seasonal | rt Use | | Pond or Flowage If yescontinue | f yescontinue> | | Town of: | CSM Vol & Page | 04-016-2-46-08-13-2 | ALLEMANNAN | + | / / / / / / / / / / / / / / / / / / / | Delta w | \ \(\bar{\bar{\bar{\bar{\bar{\bar{\bar{ | PRIVY | |
| N WITHOUT A PERMI he best of my (our) know upon by Bayfield Count i (we) consept to count | | | | 3 | | O CC | 1 | Cooking & | - Parity - | Sept. | | | | | Ire | | | | | A lone | 3 | 2 | - | # of bedrooms | | Distance Structure | Distance Science |)elta | | Lot(s) No. | 1-13-2 01-000- | | Agent Mailing Addr | Plumber: | | - | CONDITIONAL USE | |
| T WILL RESULT IN PENA vledge and belief it is true, y in determining whether w officials charged with a | | | | | | | | food prep facilities) | A.W. Parker | | i de la companya de l | | | | | Width: | Width: | □ None | | □ Privy (Pit) or □ Va | 🗴 Sanitary (Exist | ☐ (New) Sanitary | ☐ Municipal/City | | | Structure is from Shoreline : | 150 t tee | is from Shoreli | 1.0 | Block(s) No. Su | 10000 | RE | Agent Mailing Address (include City/State/Zip): | | | Zip: | JSE 🔲 SPECIAL USE | |
| NUTIES correct and complete. 1 (to issue a permit. 1 (we) i dministering county ordin | (x | (× | (x | ^ | X | (10 × 30 | × | × × | \ \ \ | < × | (× | × | ×× | (x | Dimensions | Height: | Height: | | | □ Vaulted (min. | | y Specify Type: | | What Type of ewer/Sanitary System Is on the property? | | ne: Yes feet ⊠No | Hood Floor | _ | Lat Size | Subdivision: | Volume 795 | Corded Document: | | | | L'H845 IM | □ в.о.д | |
| and complete. I (we) acknowledge that I (we) a germit. I (we) further accept liability which ring county ordinances to have access to the | | | | | | 300 | | | | | | | | | Square Footage | ght: | ght: | | - Light | 200 gallon) | 1 | Xwell | □ City | Water | ~ | o No | Are | _ | Acreage | | Volume 795 Page(s) 613 | X Yes No | Written Authorization | Plumber Phone: | 715-413-0562 | Telephone: -373-4615 318-4615 | OTHER | |

Address to send permit

Authorized Agent:

(If you

ng on behalf of the Tioga

ner(s) a letter of authorization must accompany this off. Juliu MN 5580

5580 4

Copy of Tax Statement V

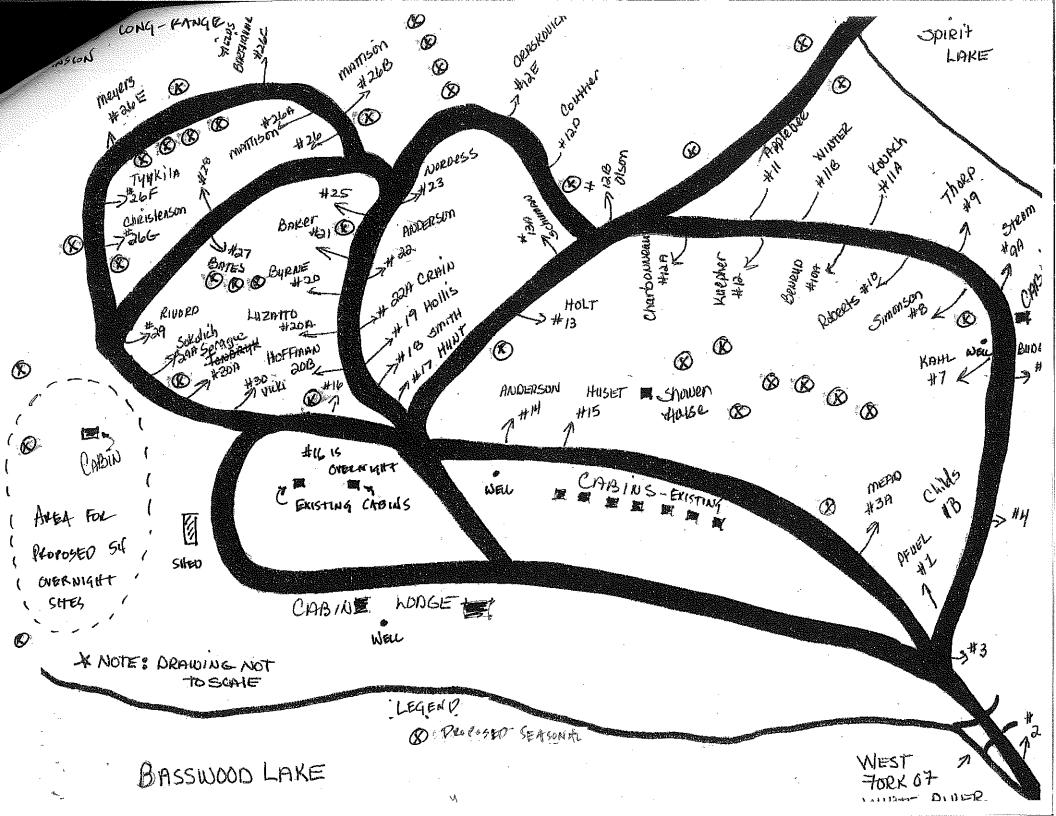
Gopy of Tax Statement V

If you recently purchased the property send your Recorded Deed

Date

Owner(s): (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

| ☐ Hold For Fees: ☐ | Hold For Affidavit: | |
|---|--|--|
| Daw Approprié | | Signature of Inspector: |
| Lakes Classification (3) Lakes Classification (3) Date of Re-Inspection: | ected by: // | Metall requirements. Date of Inspection: 1-29-14 Inst Condition(s): Town, Committee or Board Conditions Attached? |
| Was Property Surveyed □ Yes NH □ No Zoning District RAB) | No | Was Parcel Legally Created X Yes No Was Proposed Building Site Delineated X Yes No Inspection Record: |
| | | * |
| / 日 Mitigation Required □ Yes Ano Affidavit Required □ Yes 数No Mitigation Attached □ Yes 気No Affidavit Attached □ Yes 数No | is Lot(s)) SKNo | Permit #: 14-009 Is Parcel in Common Ownership Is Structure Non-Conforming |
| # of bedrooms: Santrary Date: | Sanitary Number: Reason for Denial: Permit Date: | 5 0 |
| r Use has no The Uniforn | on(s) of New Construction, semits Expire One (1) Year from th & Two Family Dwelling: ALL MuTown, Village, City, State or Fee | (9) Stake or Mark Proposed Locati NOTICE: All Land Use Per For The Construction Of New One The local |
| Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be be prior to the proposed site of the proposed site of the structure, or must be one previously surveyed corner to the other previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be one previously surveyed corner of the owner's expense. | owner's expense. feet but less than thirty (30) feet from the or verifiable by the Department by use of | wiously surveyed corner or marked by a licensed surveyor at the viously surveyed corner or marked by a licensed surveyor at the placement or construction of a structure more than ten (10) is the placement or construction of a structure more than ten (10) is not surveyed corner, to the other previously surveyed corner, by a licensed surveyor at the owner's expense. |
| Setback to Well Setback to well Many line from which the setback must be measured must be visible from one previously surveyed corner to the | White Feet White Feet Feet Feet White minimum required sethack, the box | Setback to Septic Tank or Holding Tank Setback to Drain Field Setback to Privy (Portable, Composting) Setback to Privy (Portable, Composting) |
| etland 1505 % Slope Area NVI odplain NVI | // Feet // J000+ Feet // S000+ | Setback from the North Lot Line Setback from the South Lot Line Setback from the West Lot Line Setback from the East Lot Line |
| Setback from the Lake (ordinary high-water mark) Setback from the River, Stream, Creek Setback from the Bank or Bluff Feet | Feet Feet | Setback from the Centerline of Platted Road Setback from the Established Right-of-Way |
| Measurement | Measurement | Description Description |
| Changes in plans must be approved by the Planning & Zoning Dept. | ing) | Please complete (1) - (7) above (prior to continuing) |
| | | |
| | | |
| | | |
| (*) Driveway and (*) Frontage Road (Name Frontage Road) All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20% | (*) Driveway and (*) Frontage Road (Name Front All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20% | (*): |
| | Proposed Construction North (N) on Plot Plan | Show Location or: |



SUBMIT: COMPLETED APPLICATION, TAX

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN 60 C

Date Stamp (Received) est UNIT

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Departmen DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138 DAN 062014

| ₩ 00 | Amount Paid: # 17 | Permit #: 14-0 | |
|-------------|-------------------|----------------|--|
| 7-6-14 | I | 00 | |

| may be a result of Bayfield County relying on this information (we) am (are) providing in or with this application. (we) consent to county officials charged with a above described property at any reasonable time for the purpose of inspection. Owner(s): Owner(s): Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application) | Secretal Staff FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES Tripe) reconsible for the detail and accuracy of all information I (we) arm (are) providing and that it will be relied upon by Bayfield County in detarmining whether to issue | 5 900 400 - 04 | FR 04 204 | Rec'd for Issuance | A CONTRACT OF THE CONTRACT OF | ☐ Municipal Use | e | | ☐ Commercial Use | p) | | Residential Use | | | Proposed Use | | Existing Structure: (if permit being applied for is relevant to it) Proposed Construction: | Property | Runal | 1,000 | 1 | □ New Co | Value at Time of Completion * include donated time & material | □ Non-Snoreland | | X Shoreland —▶ X Is Prop | y is Prop | Section 13, Township | slaund & Ssal | 4 | 2 | Authorized Agent: (Person Signing Application on behalf of Owner(s)) May & Lisa Childs (2) | Contractor: | ₽ , § | | IIT REQUEST |
|--|--|--|----------------|--------------------|--|--|--|---|--|--|-------------|--|--|---|--|--|---|------------------|-------------------------------|--------------------------|------------------------|----------|---|-----------------|-----------|--|---|----------------------|---|------------|---|---|-----------------|---------------|-------------|--------------------------|
| itying on this information I nable time for the purpose by the forthe purpose by the forthe purpose by the forthe forthe purpose by the forthe | FAILURE TO OB Juding any accompanying in Juding any accompanying in Juding any accuracy of all information | Other: (explain) | | | Accessory Bu | Accessory Building | ┪— | | 8 | Y | 5 5 | | | + | en e | | being applied for is r | ry | -+ | Relocate (avisting hide) | XAddition/Alteration □ | | Project (What are you applying for) an | | | rtv/Land within 100 | ls Property/Land within 300 feet of F | ship 40 N, Range | 130000 | Gov't Lot | Legal Description: (Use Tax Statement) | pplication on behalf of O | AUS ACCOUNT ACC | | acker | → M LAND USE |
| I (we) am (are) providing in a p of inspection. Owners must sign or | TAIN A PERMIT or START nformation) has been examined are level are formations are providing a | (n) | Use: (explain) | (explain) | Accessory Building Addition/Alteration (specify) | (specify) | # | Bunkhouse w/ (☐ sanitary, or ☐ sleeping quarters, | with Attached Garage | with (2 nd) Deck | with a Deck | with a Porch | with Loft | (i.e. cabin, hunting shack, etc.) | Proposed Structure (first structure on property) | | | Foundation | i I | 2-Story | + Loft | | # of Stories and/or basement | | If yes | is Property/Land within 1000 feet of Lake, Pond or Flowage | Is Property/Land within 300 feet of River, Stream Creek or Landward side of Floodplain? | nge B W | | <u> </u> | <u>≅</u> 2 | | | | 52390 | □ SANI |
| or with this application. I (see the content of the | TING CONSTRUCTION Water that it will be relied upond that it will be relie | in the second se | | | teration (specify) | | 10/0/ | leeping quarters, | ge | and the state of t | | an manasata da da manasata | | nack, etc.) | Proposed Structure | A CONTROL OF THE PROPERTY OF T | Length: | | | | ☐ Year Round | 120.00 | Use | | \ | | (incl. Intermittent) | | Town of: | /ol & Page | ב ו ו | | one: | Q | 5239 Daluth | |
| we) consent to county of | ITHOUT A PERMIT WI best of my (our) knowledg on by Bayfield County in | | | | - Control of the Cont | THE PARTY OF THE P | deck | or ☐ cooking & food prep facilities) | Constitution of the consti | | | The second secon | , and the second | - Approximate and the state of | <u>)</u> | The state of the s | Wi | | X None | | 2 | | of bedrooms | | 100 | Distance Structure | Distance Structure / えの | ch | | | #le=00:12: | Agent Mailing Address | Plumber: | | | CONDITIONAL USE |
| ficials charged with admir this application) | ILL RESULT IN PENALTIES ye and belief it is true, correct determining whether to issue | | | | | | ALL THE COLUMN TO THE COLUMN T | | | 1,44,61 m. | 51445. | | | 1.0000000000000000000000000000000000000 | | | Width: | ☐ Compost Toilet | Portable (w/service contract) | Privy (Pit) or | | 1 | Wha Sewer/Sa Is on th | | 100+ feet | is from Shoreline | Distance Structure is from Shoreline: | | Lot Size | | ODC - Recorded | | (C | 2781 | ST. ST. | E ☐ SPECIAL USE /Zip: |
| | ப வ | | | × . | × | × | ì | × | × | (x) | (×) | ××× | × | (x | Dimensions (| | Height: | | ce contract) | Vaulted (min 200 gallon) | Specify Type: | | What Type of Sewer/Sanitary System Is on the property? | | et XNo | | Is Property in et Floodplain Zone? | | , in the second | ion: | | 1 | | ريل. الله: | 558 B | □ B.O.A. |
| to have access to the | nd complete. I (we) acknowledge that I (we) permit. I (we) further accept flability which | | | | | | 2000 | | | T. A. PARISON P. | | | | | Footage | Square | | | Harmon Programmer T | | X Well | City | | | □ No | | n Are Wetlands | 37.01 | Acreage | S (()) | Document: (i.e. Property Ownership) 795 Page(s) 6/2 | Written Authorization Attached Yes | Plumber Phone: | 412 - 05/c2 | 372-465 | Telephone: 7/6 |

Address to send permit 5231

toward

Desco

Dularty,

25

SSB 0 Attach

Copy of Tax Statement V

ty purchased the property send your Recorded Deed

must accompany this application)

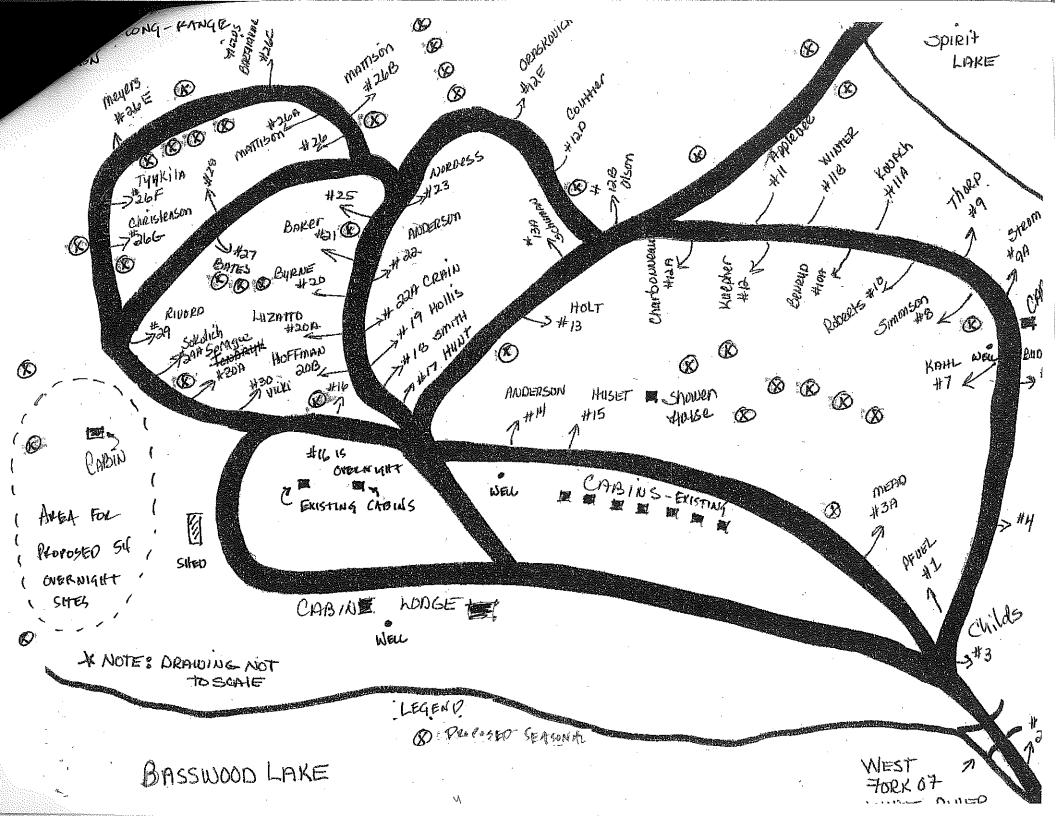
Date_

96.61

Authorized Agent:

(If you are signing on

| | Dete | ached.) | - 7. M. May need to be attached.) | 8 | Attached? Yes | d Conditions | Condition(s): Town, Committee or Board Conditions Attached? Signature of Inspector | Condition(s):Tow |
|--|--|---|--|--|--|---|--|---|
| oning District (RB) akes Classification (3) | Zoning District Lakes Classificat | | | | anta. | wen. | \mathcal{L} | Inspection Record: Muta |
| <i>III</i> □ No | | ₹ % | Were Property Lin | | □ No | 透 Yes 弦Yes | Was Parcel Legally Created Was Proposed Building Site Delineated | Was /as Proposed Bu |
| | se#: | by Variance (B.O.A.) Case | Previously Granted by Variance (B.O.A.) | | | | G - | Granted by Variance (B.O.A.) |
| uired □Yes X\No ched □Yes X\No | Affidavit Required Affidavit Attached | □Yes &No | Mitigation Required Mitigation Attached | P X X Q ON | | ES (Deed of Record) (ES (Fused/Contiguo) (ES | Is Parcel a Sub-Standard Lot | Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming |
| | | | | | Reason for Denial: Permit Date: 7 | | | Permit Denied (Date): Permit #: /// ^ |
| ite: | Sanitary Date: | # of bedrooms: | The local Town, Village, City, State or Federal agencies may also require permits. Inly) # of bedrooms: | City, State or umber: | al Town, Village, City, Sta | The loc | The lo lssuance information (County Use Only) | suance Inforn |
| <u>(P)</u> , and <u>Well (</u> W). Code. | <pre>ink (HT), Privy \(\) s not begun, form Dwelling C</pre> | Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W). NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. | , Septic Tank (ST), Dr. In the Date of Issuance Municipalities Are Rec | Construction (1) Year from welling: ALL | Ition(s) of New : Simits Expire One e & Two Family I | yposed Loca Land Use Pe n Of New On | Stake or Mark Proposed Location(s) of New Construction, Septic Tank (NOTICE: All Land Use Permits Expire One (1) Year from the Date of Is For The Construction Of New One & Two Family Dwelling: ALL Municipalities | (9) |
| measured must be visible from of the structure, or must be | owhich the setback must be a conjugate of the proposed site of | other previously surveyed come for marked by a licensed surveyor at the owner's expense. Other previously surveyed come for marked by a licensed surveyor at the owner's expense. Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from priority surveyed corner, or werlfable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense. | the minimum required setba | irty (30) feet from Department by use | the owner's expense. (1) feet but less than the convertible by the test than the test | nsed surveyor at 1 more than ten (1) ly surveyed come | d corner or marked by a licer construction of a structure corner to the other previously reyor at the owner's expense | er previously surveye or to the placement o previously surveyed rked by a licensed sur |
| comer | le from one | | - boundary line from which th | Feet Feet | at of the minimum reg | Ig) | Setback to Drain Field Setback to Privy (Portable, Composting) Prior to the placement or construction of a structure within ten (10) feet of the n | tback to Drain I |
| 200+ Feet | | | Setback to Well | | Ž, | ¥ | Tank or Holding Tan | back to Septic |
| Feet Feet | | % Slope Area dplain | Setback from 20% Slope Area Elevation of Floodplain | | 1921 | | | |
| INT Feet | | tland | Setback from We | Feet | 2 S 4 S 4 S | Leke | from the North Lot Line | Setback from the North Lot Line Setback from the South Lot Line |
| 100 + Feet | iter mark) | Setback from the Lake (ordinary high-water mark) Setback from the River, Stream, Creek Setback from the Book or Bluff | Setback from the | Feet Feet | 100 f | d Road f-Way | Setback from the Centerline of Platted Road Setback from the Established Right-of-Way | tback from the |
| Measurement | | Description | | ement | Measurement | | Description | |
| d by the Planning & Zoning Dept. | | Changes in plans must be approve | Ch | | osest point) | ed to the cl | Setbacks: (measured to the closest point) | (8) |
| | | | | | inuing) | prior to cont | Please complete (1) – (7) above (prior to continuing) | Please comple |
| | | | | | | | | |
| | | | | | | | | |
| | , | | | 7 | 4 | | | |
| | | | | | | | | |
| / | | | | | | | | |
| P | d/or (*) | (*) Driveway and (*) Frontage Road (Name Frontage Road) All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20% | nd (Name Frontage Reperty (*) Drain Field (DF); (' ek; or (*) Pond 3% | rontage Roa on your Proj c Tank (ST); (Stream/Cree opes over 20 | veway and (*) F sting Structures all (W); (*) Septi (e; (*) River; (*) stlands; or (*) Sl | *************************************** | Show Location of (*): Show: Show: Show any (*): Show any (*): | (3) (4) (5) (6) |
| | | | | 3 | Proposed Construction North (N) on Plot Plan | Propo North | Show Location of: Show / Indicate: | |



SUBMIT: COMPLETED APPLICATION; TAX STATEMENT AND FEETO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN #50 #50

Date Starup (Received) 57

JAN 062014

THE PER Refund: date: Amount Paid: # 11-0-14 11-11-10

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department. DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN IS

Bayilald Co. Zoning Dept.

| PA. | I (we) declare that this application find, and (are) responsible for the detail and may be a result of Bayfield County rely above described property at any reason. | Secretarial Staff | LED OF ZUIN | | Recidior Issuan | | ☐ Municipal Use — | | | Commercial Use | | | Residential Use | · · · · · · · · · · · · · · · · · · · | | Proposed Use | Froposed Construction | Existing Structure: (If pen | | Property | □Run | | , i zs | | donated time & material | 3 R | □ Non-Shoreland | | Shoreland — Creek | J⊈ is P | W | NE 1/4, NW | PROJECT Legal | 7 | Agent: | IRON RIVER | Khouda Inalacke | Owner's Name David | TYPE OF PERMIT REQUESTED—▶ ¾ LAND USE ☐ SANITARY |
|--|---|---|------------------|------------------------|-----------------|--|--------------------|----------|---------------------------|--|------------------------------|-------------------|--|---------------------------------------|---|--------------------|-----------------------|---|--------|--------------|----------------|--------------------------------|---------------------|------------------|-------------------------------|------------------------------------|--|--|---|-------------------------|-------------|--|--------------------|--|--|------------|-------------------------|--------------------|--|
| ers listed | 을 한 글 글 | | | | 82 | |] <u> </u> | ۵ 🗆 | | | | | | | |] < | | mit bein | | erty | Run a Business | Relocate (ex | ition/A | New Construction | | Project | | roperty/ | or Land | roperty, | Township | 1/4 | Legal Description: | MAR | MAC Ning Applic | 1.60; | halack S wara | UGS VOWING | ₽ |
| 2/ | any accompanying in scy of all information in this information I ime for the purpose | FAILURE TO | Other: (explain) | Special U | | Accessory | Accessory Building | Mobile H | Bunkhous | | | | | | Residence | | | g applied fo | | | less on | Relocate (existing bldg) | Addition/Alteration | uction | 0 | Project | | Land within | ward side o | Land within | 46 | Gov't Lot | - | | Suzanne King (Person Signing Application on behalf of Owner(s)) | CA845 | id Red | 28 | X LAND USE |
| All Owners must s | uonig any accompanying information has been examined by nis accuracy of all information I (we) am (are) providing and that it ying on this information I (we) am (are) providing in or with th table time for the ourpose of inspection. | OBTAIN A PERMIT O | Other: (explain) | Special Use: (explain) | | ⊈ | = | | Bunkhouse w/ (☐ sanitary, | with Attached Garage | with (2 nd) Deck | with (2") Porch | with a Porch | with Loft | Residence (i.e. cabin, hunting shack, etc.) | (F) | | (if permit being applied for is relevant to it) | | ☐ Foundation | | ☐ Basement | 1-Story + | □ 1-Story | 21.24 | # of Stories | The second secon | > is Property/Land within 1000 feet of Lake, Pond or Howage If yescontinue | Creek or Landward side of Floodplain? If yes- | n 300 feet of Rive | N, Range | Lot Lot(s) | tatemer | (75) | of Owner(s)) | 2.1. | | | DUSE 🗆 SAN |
| lgaror let | oviding and iding in or t | r STARTIN | | | | ion/Alte | - I. | | I옥 □ | d Garag | × | Sh | • | | ting sha | Pro | | - L | | | 'n | | Loft | | 10000000 | 1 | | e, Pond | If yes- | r, Stream | ₹ | CSM | 04-016-J. | 8175/55 | Agent P | Contract | Clty/state/Zip: | Mailing | SANITARY |
| ter(s) of authoriza | d by me (us) and to the d that it will be relied u with this application. I | G CONSTRUCTION | | | | eration (specify) | | 2 | sleeping quarters, | e | | | | | ick, etc.) | Proposed Structure | Lengun: | Length: 36' | mean | | | T. Triffettikkikking. | Year Round | ▼ Seasonal | an observation and the second | Use | | If yescontinue — | -continue | ind. Intermittent) | Town of: | Vol & Page | 016-2-46-08 | (1) (2) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1 | | Site #20 | /State/Zip: | Mailing Address: | PRIVY |
| tion must accomp | (us) and to the best of my (our) knowled will be relied upon by Bayfield County in s application. I (we) consent to county of | WITHOUT A PERMI | | | | | | 171101 | or.□ cooking & | O D FE PARTY MANAGEMENT | | | | | *************************************** | re | | × | - | | ₩ None | o u | - 1 | <u>-</u> | bedrooms | # of | | Distance Stru | 5000 | Distance Stru | ietz. | Lot(s) No. | 13- | Q Q | Agent Mailing Ad | Dirmber: | 7 | | CONDITIONAL USE |
| must sign or letter(s) of authorization must accompany this application) | wedge and belief it is true, y in determining whether ty officials charged with a | FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES | | | | T. CALLES TO THE PROPERTY OF T | (42) | ago o | food prep facilities) | | | Anna Agent Spring | ······································ | | | | Width: | Width: 181 | □ None | 1 | | ☐ Privy (Pit) or ☐ Vaulted (mi | | ☐ Municipal/City | Is o | Sewe | | Distance Structure is from Shoreline : | 4 | cture is from Shoreline | | Block(s) No. | 10000 | | Apont Mailing Address (include City/State/Zin) | A-00-1-1-1 | White Early | 7 21 | ☐ CONDITIONALUSE ☐ SPECIALUSE ☐ B.O.A. ☐ OTHER |
| — | correct and con to issue a permi dministering cou | VLTIES | | - | | | - 6 | 2 - |) | _ | _ | | - | | - - | <u> </u> | | | | let | service co | r Va | ry Specify | | Is on the pro | What Type of Sewer/Sanitary Sys | | line: | feet | line: | Lot Size | Subdivision: | Volume_ | | ate/7in) | | Resert | . | AL USE |
| Date / 8 | d complete. I (we) acknowledge that I (we) permit. I (we) further accept liability which go county ordinances to have access to the | | | × | | × | 12/1/1/ | 36 × 13 | | × | × | < × | | × | × | Dimensions | Height: | Heigh | | | ontract) | Vaulted (min 200 gallon) | cify Type: | | roperty? | ype of ary System | NA | X No | Floodplain Zone? | | | ion: | 195 | | | P. 4 | ن با | | □ в.о.д. |
| 114 | acknowledg er accept li s to have a | | <u> </u> | | | | | 1 | | ~ | | | _ | | + | - | : | t: Lean | 3 | | 0 | 0 gallon) | | | | | | _ | y in 'one? | | Acreage 37, | | Page(s) 6/ | tached Yes | ritten Au | 137 | Gell Phone: | lephone | ☐ OTHER |
| | ge that I (we) ability which iccess to the | | | | | and the second second | C/03+C | 1 | | The state of the s | | | | | | Square Footage | | Height: Lean Tes L | V 20 V | <u> </u> | | | - X Well | ☐ City | | Water | | □ No | Are Wetlands Present? | A (8/-at/-ad- | 0 | - Laboratoria de Caraciano de C |) 6/2 | Attached Attached No. Yes S No. | Mritten Authorization | 413-0562 | 373-4615 Cell Phone: | 715 | HER |

Authorized

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

CREEK RU

SUPERIOR

12/

Attach

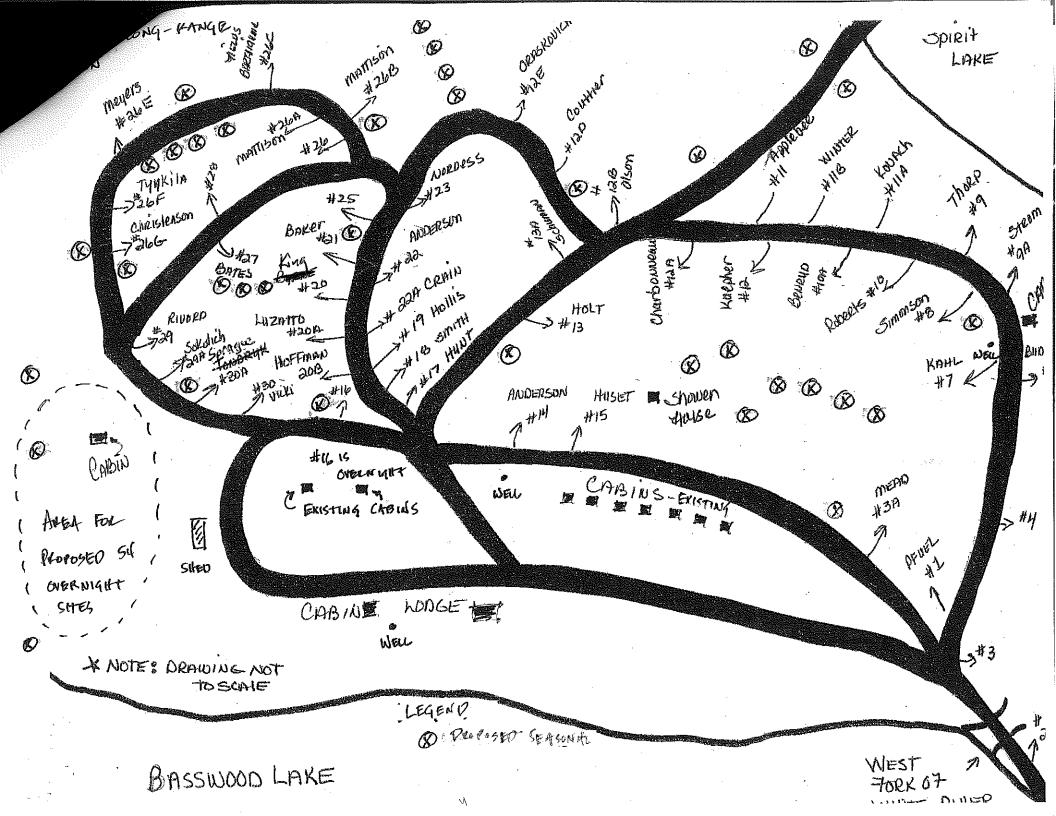
S 4882 Copy of Tax Statement V

If you recently purchased the property send your Recorded Deed

Date

Address to send permit 447/

| Please complete (1) - (7) shown (prior to continuing) (b) Softbacks (measured to the choice) point) (c) Softbacks (measured to the choice) point (measured to the choice) point) (c) Softbacks (measured to the choice) point (measured to th | Changes in plans must be appeared by Comer to the Bank or Bluff and the Setback from the Bank or Bluff and Setback from the Bank or Bluff and set set Setback from Wetland Setback from the Bank or Bluff and the setback from which the setback from the Bank or Bluff and the setback from the bandary line from which the setback from the bandary line from which so the set of setback from the bandary line from which the setback from the bandary line from which the setback from the bandary line from which so the setback from the bandary line from which the setback from the bandary line from which so the setback from the bandary line from which so the setback from the bandary line from which the setback from the bandary line from which the setback from the bandary line from which the setback from the setback from the bandary line from which the setback from the bandary line from which the setback from which the setback from the bandary line from which the setback from which the setback from the Bank or Bluff from the bandary line from which the setback from the Bank or Bluff from the bandary line from which the setback must be measured must be setback from the Bank or Bluff from the Bank or Bl | oad Measurement | te (1)—(7) above (prior to continuing) Setbacks: (measured to the closest point) Description Measured to the closest point) Established Right-of-Way 20 Established Right-of-Way 20 | Please complete (1)—(7) above (prior to continuing) (8) Setbacks: [measured to the closest point) Setback from the South Lot Line Setback from the Established Right of-Way Setback to Drain Field Setback to Drain Field Setback to Drain Field Setback to Play (Portable, Composting) For the Journal of substance architecture from the Lot Line Setback to Drain Field Setback from the Sast Lot Line Setback from the Sast Lot Line Setback to Drain Field Setback to Play (Portable, Composting) The Constitution of survaire more than ten to the count of survaire than ten to the count of survaire more than ten to the count of survaire than ten to the count of survaire ten more than ten to the count of survaire ten ten product of the count of survaire ten ten ten to the count of survaire ten ten product of the count of survair |
|--|--|---|--|--|
| | | | | |
| Proposed Construction North (N) on Plot Plan (*) Driveway and (*) Frontage Road (Name Frontage Road) All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20% | ad (Name Frontage Road) operty (*) Drain Field (DF); (*) Ho eek; or (*) Pond 20% | Proposed Construction North (N) on Plot Plan (*) Driveway and (*) Frontage Ro All Existing Structures on your Pr (*) Well (W); (*) Septic Tank (ST) (*) Lake; (*) River; (*) Stream/Cr (*) Wetlands; or (*) Slopes over | of: | (2) Show Location of: (2) Show / Indicate: (3) Show Location of (*): (4) Show: (5) Show: (6) Show any (*): (7) Show any (*): |



SUBMIT: COMPLETED APPLICATION, TAX
STATEMENT AND FEE TO: Bayfield County
Planning and Zonling Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received)

Refund: fit Paid \$180 エ-80 アートの 7

Zorina Dagi

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED

| X is Property/Land within 300 feet of River, Stream (ind. Intermittent) Creek or Landward side of Floodplain? If yes—continue → | Section 13 , Township 46 N, Range 8 W | ME_1/4, MW_1/4 Gov't Lot (s) | PROJECT Legal Description: (Use Tax Statement) | Authorized Agent: (Person Signing Application on behalf of Owner(s)) AJICA SKI JNES | Contractor: | l | Owner's Name: CSIMONSON OBJECT CSIMONSON OBJECTION P. TRALACKIR | TYPE OF PERMIT REQUESTED→ X LAND USE SANITARY PRIVY CONDITIONAL USE SPECIAL USE | OO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPUCANT |
|---|---------------------------------------|------------------------------|--|---|---------------------|--------------------|---|---|--|
| er, Stream (incl. Intermittent) If yescontinue | Town of: |) CSM Vol & Page | PIN: (23 digits) 04-0/6- | 715-682-29/ | Contractor Phone: P | City/State/Zip: | Mailing Address: G 1925 BASSO | NITARY 🗆 PRIVY 🗆 | • |
| Distance Structure is from Shoreline: | Delta | Lot(s) No. Block(s) No. | 04- 04-016-2-46-08-13-20 Volume 795 P | Agent Phone: Agent Mailing Address (include City/State/Zip): 715-682-291 62704 03 457000 | Plumber: | INOU RIKE WI SY806 | 6 1925 BASSWOOD TROWN MINER | CONDITIONAL USE SPEC | HOW DO I FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning/asp) |
| eline: Is Property in feet Floodplain Zone? | Lot Size Acr | Subdivision: STE | Recorded Document: (i.e. P | trate/Zip): Writte Attack Yes Yes | | 806 | i the | □ B.O.A. | sit our website www.bayfieldc |
| Are Wetlands Present? | Acreage 37.01 | 1 + 1 | e. Property Ownership) Page(s) 613 | Written Authorization Attached Pes No | Plumber Phone: | 413-0562 | Telephone: 372 - 4615 | OTHER | ounty.org/zoning/asp) |

🗴 Shoreland

★Is Property/Land within 1000 feet of Lake, Pond or Flowage
If yes---continue

₩

Distance Structure is from Shoreline :

Is Property in Floodplain Zone?

□ Yes ⊠ No

Yes

Are Wetlands
Present?

XYes

No

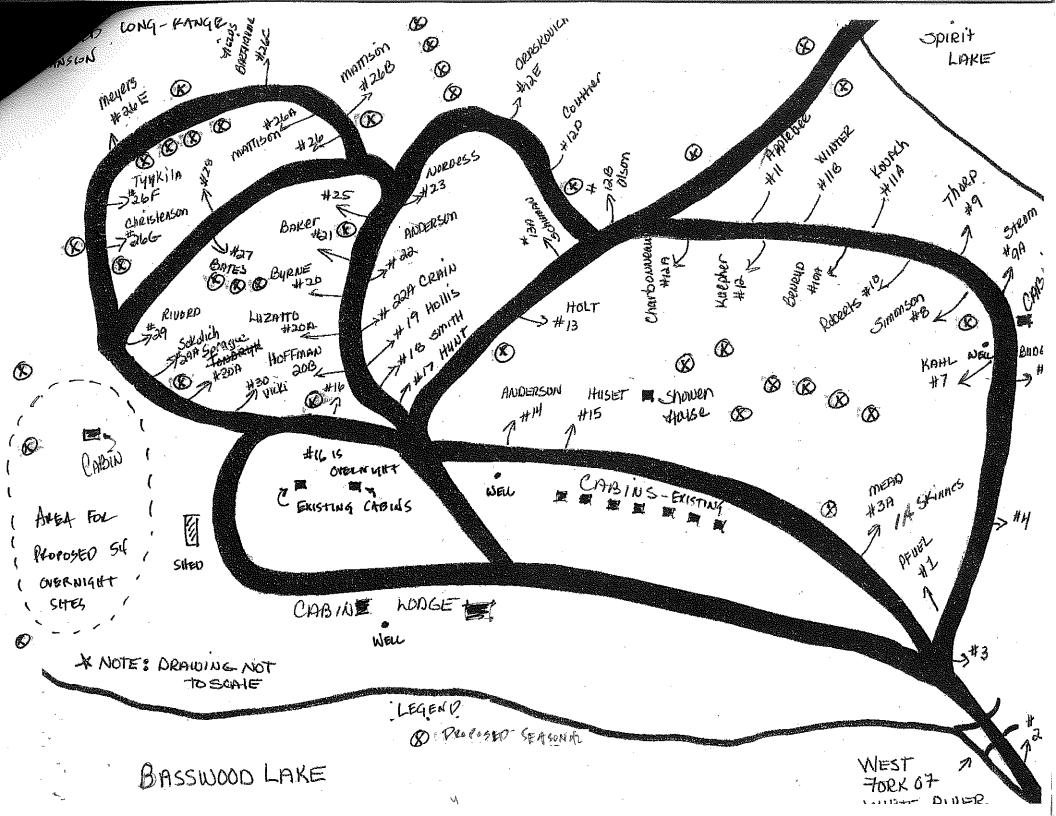
Non-Shoreland

| Proposed Construction: | Existing Structure | | | | MANAGEMENT | ر الاران الاران | 1 | | Value at Time of Completion * include donated time & material |
|------------------------|---|---------|------------------|---------------------------------|---|---|--------------------------------|--------------------|---|
| uction: | Existing Structure: (If permit being applied for is relevant to it) | | Property | ☐ Run a Business on | ☐ Relocate (existing bldg) | ⊂ Conversion | XAddition/Alteration | □ New Construction | Project (What are you applying for) |
| | or is relevant to it) | TO DECK | ☐ Foundation | ☐ No Basement | ☐ Basement | ☐ 2-Story | ☐ 1-Story + Loft | 1-Story | # of Stories and/or basement |
| Length: | Length: | | | | | | Year Round | 文 Seasonal | Use |
| | | | - | None None | | 3 | 2 | 1 | # of bedrooms |
| Width: | Width: | None | ☐ Compost Toilet | ☐ Portable (w/service contract) | ☐ Privy (Pit) or ☐ Vaulted (min 200 gallon) | X Sanitary (Exists) Specify Type: (ON U | ☐ (New) Sanitary Specify Type: | ☐ Municipal/City | What Type of Sewer/Sanitary System Is on the property? |
| Height: | Height: | - | | | min 200 gallon) | e: CONV | e: | | tem y? |
| | | | | | | | X Well | □ City | Water |

| Proposed Use | `\ | Proposed Structure | Dimensions | Square |
|---------------------|-----|--|------------|--|
| | | Principal Structure (first structure on property) | × | antimatical desiration and the second |
| | | Residence (i.e. cabin, hunting shack, etc.) | (x |) |
| | | with Loft | (x | |
| Residential Use | | with a Porch | (x |) |
| | | with (2 nd) Porch | (x |) |
| | | with a Deck | (× |) |
| | | with {2 nd } Deck | (x |) |
| ☐ Commercial Use | | with Attached Garage | (× | |
| | | Bunkhouse w/ (\square sanitary, or \square sleeping quarters, or \square cooking & food prep facilities) | (x |) |
| | | Mobile Home (manufactured date) | (x |) |
| | X | Addition/Alteration (specify) dec. | (10 × /6 | 3) /60 |
| □ Municipal Use | | Accessory Building (specify) | × | , |
| | | Accessory Building Addition/Alteration (specify) | × | |
| Rep'd for Issuer to | أسر | | | |
| S (4) | | Special Use: (explain) | (x | _ |
| | | Conditional Use: (explain) | × | |
| S See 15. | | Other: (explain) | (X | 1 |
| | | | | |

FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

"Twell declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection. Owner(s): ________(If there are Multiple Address to send permit Authorized Agent: (IFYou hers listed on the 62704 signing Jabilstrom I All Own er(s etter gh or letter(s) of authorization must accompany this application) Hohland, company this application) 34906 Copy of Tax Statement Date Date



SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT

NAME OF THE PROPERTY AND SECURISIN DEC 3 0 2013 np (Received)

1-8-61 OSIA

INSTRUCTIONS: N Checks are made I DO NOT START CO

| No permits will be issued until all fees are paid. | Laginor Co. Com | |
|--|-----------------|---|
| payable to: Bayfield County Zoning Department. | | |
| ONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. | | HOW DO I FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning/a |
| | | |

| V T | · ~ ~ ? ? ? ? ? | Hec a for Issuance | | | Municipal Use | | | | Commercial Use | | | | Residential Use | | | Proposed Use | oposea construction: | xisting Structure: (if permit being applied for is relevant to it) | - | | | | 120 | | ł | Value at Time of Completion * include donated time & material | Non-Shoreland | Siloreidild — | O (M). | Section 13 | 1, N | PROJECT LOCATION | uthorized Agent: (Perso | Gan Sprague (siteleases | 100 | ddress of Property | Muer's Nathe: |
|------------------|----------------------------|------------------------|---|--|--------------------|-------------------------------|---------------------------------|---------------------------------|---|------------------------------|-------------|-------------------------------|-----------------|---|--|---------------------|----------------------|--|---|---|----------------|--------------------------|----------------|---------------------|-------------------------|---|---------------|---|---|------------------|--|------------------------|--|-------------------------|------------|---|------------------|
| J | | G I | | | | X | | | יט | - | | | | | |) \ | July | f permit beir | | | Property | Rin a Blistness on | Conversion | Addition/Alteration | New Construction | Project (What are you applying for) | | Is Property | Is Property | _ , Township | W 1/4 795 | Legal Description: | n Sigaing Appli | ٩٩٥٥ | TOST TOST | Macker | Š |
| Other: (explain) | Condition | Special Us | | Accessory | Accessory Building | Addition/ | Mobile Ho | Bunkhous | | | | | | Vesidelice | Posidono | Pincipal | | าg applied fo | | | 1035 011 | xisting bldg) | | Ateration | ruction | ct oplying for) | | /Land withir | /Land withir dward side o | | Gov't | | cation on behal | (site | | Š | |
| plain) | Conditional Use: (explain) | Special Use: (explain) | | Building Additio | Building (specify) | Addition/Alteration (specify) | Mobile Home (manufactured date) | Bunkhouse w/ (□ sanitary, | with Attached Garage | with (2 nd) Deck | with a Deck | with (2 nd) Porch | with a Porch | <u>≤</u> . ີຄ | die cabin bunti | Structure (first st | | r is relevant to it) | | | | □ No Basement | - 1 | ☐ 1-Story + Loft | □ 1-Story | # of Stories and/or basement | | À Is Property/Land within 1000 feet of Lake, Pond or Flowage If yescontinue | Is Property/Land within 300 feet of River, Creek or Landward side of Floodplain? | N, Range | Lot Lot(s) | (Use Tax Statement) | ļ | | | | |
| | | | | Accessory Building Addition/Alteration (specify) | (| W BULLO | d date) | or □ sleeping quarters, | Garage | (| | 5 | | th Loft | Posidones (i.e. cabin, busting thank atc.) | Proposed Structure | Length: | Length: | | | | 4 | | × | ☐ Seasonal | nt Use | | Pond or Flowage If yescontinue — | Is Property/Land within 300 feet of River, Stream (incl. Intermittent) reek or Landward side of Floodplain? | W Town of: | CSM Vol & Page | 04-016-2-46-08- | Agent Phone: | Contractor Phone: | Tren River | 61935 Base | Mailing Address: |
| | | | | Ψ) | ļ | MORCH | | or \Box | | | | | | | 7 | ure | | | | | D NOIR | X. D | 3 | 1 2 | 1 | # of bedrooms | | · · · · · · · · · · · · · · · · · · · | , | Delta | e Lot(s) No. | 13-2 01-000- | 1 | Site. | E H | Brown Rd, | City/State/ |
| | | | | | | | <u> </u> | cooking & food prep facilities) | | | | | | sejakogogogi jetrindik esteriklaren jethemerretinmarra arhomatitere | 11111111111111111111111111111111111111 | | ANIGUE | Width: | | □ None | Compost Toilet | Dortable (w/se | | ☐ (New) Sanitary | ☐ Municipal/City | Sev | | Distance Structure is from Shoreline: | Distance Structure is from Shoreline : | | o. Block(s) No. | 00~10000 | ddress (include City, | site 30-A | 54847 | Frenchiver, L | zip: |
| | • | | *************************************** | | ` ~ | _ (/ | (| es) (| ^ | (| _ | | | - - | | , , | | | | | v/service co | <u>.</u> | <u>. iš</u> | 1 | City | What Type of Sewer/Sanitary System Is on the property? | | oreline : feet | oreline : feet | Lot Size | Subdivision: | Volume_ | /State/Zip): | | | | |
| × | X | X | *************************************** | × | × | 1 OE × E | х) | × | ×) | х) | × | × - | × | × > | < > | Dimensions v | певан | Height: | - | - ALL CALLS STORY | nu deci/ | vaulted (min 200 gallon) | offy Type: Can | Specify Type: | | pe of ry System operty? | | □ Yes Xi No | Is Property in Floodplain Zone? | /38 | the state of the s | 795 P | Writt Attac | Plum | 413- | Cell Coll Coll Coll Coll Coll Coll Coll | Telep |
| | | | | | | 046 | | | *************************************** | | | | | | | Square Footage | - | | | | | jallon) | | Xwell | □ City | Water | | | Are Wetlands e? Present? | Acreage 37.01 | | Volume 795 Page(s) 618 | Written Authorization, Attached ON TO NO | Plumber Phone: | 3-0562 | Cell Phone: 115 | Telephone. |

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Owner(s): _____ (If there are

7 A SMAPLY.

For listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a ying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administeri rable time for the purpose of inspection.

Authorized Agent

Address to send permit

(If you are signing on behalf of the owner(s) a letter of $\frac{17130 \text{ Suther-lawy}}{1900 \text{ Red}}$

of authorization must accompany this application)

Mason

54856

Attach

Copy of Tax Statement

Fyou recently purchased the property send your Recorded Deed

Date

Date Dec. 26

Ž

permit. I (we) further accept liability whiching county ordinances to have access to the

| (9) Stake or Mark Proposed Location(s) of NOTICE: All Land Use Permits Explision (County Use Only) Issuance Information (County Use Only) Permit #: / / _ CO / 3 Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming | Please complete (1) – (7) above (prior to continuing) (8) Setbacks: (measured to the closest point) (8) Setbacks: (measured to the closest point) Description Description Description Description Description Description Description Setback from the South Lot Line Setback from the South Lot Line Setback from the Established Right-of-Way Setback to Septic Tank or Holding Tank Setback to Privy (Portable, Composting) Setback to Privy (Portable, Composting) Setback to Drain Field Setback to Privy (Portable, Composting) Note that the owner's expense or construction of a structure more than ten (10) feet but less the owner's expense or construction of a structure more than ten (10) feet but less the owner's expense. | (2) Show / Indicate: No (3) Show Location of (*): (*) (4) Show: (5) Show: (*) (6) Show any (*): (*) (7) Show any (*): (*) |
|---|--|---|
| New Construction, Septic Tank (ST). Drain Ne One (1) Year from the Date of Issuance if C mily Dwelling: ALL Municipalities Are Requir lage, City, State or Federal agencies may also lary Number: On for Denial: ON Holigation Required Mitigation Attached Mitigation Attached Previously Granted by Were Property Lines Yes No - W No they need to be attach | point) Measurement 100+ Feet 100+ Feet 100+ Feet 100+ Feet Setback fro Setba | North (N) on Plot Plan (*) Driveway and (*) Frontage Road (Name Frontage Road) All Existing Structures on your Property All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20% |
| In field (DF), Holding Tank (HT), Privy (P), and Well (W). F Construction or Use has not begun. Is constructed. If construction or Use has not begun. Is constructed. If construction or Use has not begun. If | Changes in plans must be approved by the Planning & Zoning Dept. Changes in plans must be approved by the Planning & Zoning Dept. Description Measurement Description Measurement Top 4 Feet In the Bank or Bluff MAA Feet Tom 20% Slope Area Mell Feet on 20% Feet on 20% Slope Area Mell Feet on 20 | ding Tank (HT) and/or (*) Privy (P) |

